Data Quality Report

August 2013

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:
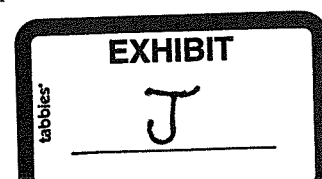
- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
  - o User entry discrepancies
  - o Other observations

Reports Validated During August 2013

Newly Developed Reports[1]

- MWLS54A (*Children in the initial 90 days of a trial home visit - caseworker contacts*)
- MWZ1271 (*Timeliness of Investigations for Custody Children in a Resource Setting*)
- MWLS55SA (*Custody Children Remaining in Same Out of Home Placement Following an Investigation*)
- MWZWCR3 (*Frequency of Caseworker Visits with Parents/Caregiver with Whom Children are to be Reunified*)
- MWZPLMB (*Frequency of Caseworker Visits with Therapeutic Foster Parents with Whom Custody Children are Placed*)
- MWZPLMC (*Frequency of Caseworker Visits with Non-Therapeutic Foster Parents with Whom Custody Children are Placed*)
- MWBRD06 (*Rate of Maltreatment in Care*)
- MWZWC5D (*Children in Out of Home Care Contact with Worker – Seen Alone*)

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[1] These reports were developed during August 2013 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

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EXHIBIT

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- Automated supervisory report *(Count of Supervisors and their Assigned Caseworkers)*

Over-Arching Issues

As noted in the revised Data Scrubbing and Report Validation Corrective Action plan, the ongoing data scrubbing and transformation process identifies all MACWIS "missing data fields." These missing data fields are not fixed through the data scrubbing and transformation process. Rather, once identified, BCS sends all missing data field information to MIS for analysis and possible data fixes in the source system, MACWIS. The data scrubbing and transformation process is applied to all MACWIS data (historical data and current). The data scrubbing process is applied to the entire MACWIS extract received by BCS and is not conducted on a report-by-report basis. The missing data identified in the data scrubbing process may pertain to data fields that are included in the extract but that are not necessarily used in a particular report. Also, since the MACWIS data extracts cover a much longer period of time than that covered by the individual reports, the missing data fields identified in the data scrubbing process may precede the period of time covered by the report by as much as several years. Therefore, producing more specific information or statistics on the results of the data scrubbing process would not yield greater insights into the accuracy of any particular report.

Findings of Individual Report Validation

MWLS54A *(Children in the initial 90 days of a trial home visit- caseworker contacts)*

Percentage of Report-Related Discrepancies[2]: 3.00%

Percentage of User Entry-Related Discrepancies[3]: 3.11%

Most Commonly Noted User Entry-Related Discrepancies:

Of the review sample of 161 cases that were validated in July 2013, there were 50 cases (3.11%) identified with user entry related discrepancies. The validation of the report revealed that sometimes the information documented in the narrative in the child's case record does not reflect the information selected in the participant box, legal screen or location box in MACWIS. For example, the review of the narrative indicated the child was seen alone; however, the father was

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[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

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listed in the participant box in MACWIS. In other instances, the review of the narrative indicated that the child was no longer in custody; however, the legal screen had no custody end date.

Suggestions for Improving Data Quality:

- Supervisors and caseworkers should participate in MACWIS/data entry learning sessions to address the most common user related discrepancies and discuss the importance of data accuracy. To this end, we will refer the information in this report to the Data and MACWIS Sub-Team of the State Implementation Team to determine how best to transmit information to the field on these types of user errors.

- Supervisors, as part of their regular case reviews, should ensure that the information in the narrative matches the information in the placement and the legal history screens of the case. We will refer the information in this report to the Training Sub-Team of the State Implementation Team to determine how this type of information may be best conveyed to the supervisors and in which format.

Other Observations

There were no other observations noted for this report.

MWZ1271 *(Timeliness of Investigation for Custody Children in a Resource Setting)*

Percentage of Report-Related Discrepancies: 0.30%

Percentage of User/Entry-Related Discrepancies: 1.01%

Most Commonly Noted User/Entry-Related Discrepancies:

Of the review sample of 181 cases that were validated in July 2013, there were 15 cases (1.01%) identified with user entry related discrepancies. The validation of the data revealed that information in the legal status and placement screens in MACWIS were the source of the most common user entry related discrepancies, since information in those screens was often not updated or was missing ,e.g., placement history. There were cases identified in which the children were no longer in custody when the intake report was generated. For example, the review of the narrative in the child's case record indicated that the child was no longer in custody, while the legal history screen in MACWIS indicated that the child was still in custody. With regard to placement of children, there were cases in which the MACWIS placement screens did not reflect the child's most current placement.

Suggestions for Improving Data Quality:

- The same suggestions noted above for MWLS54A for addressing the user errors apply to this report as well.

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Other Observations

There were no other observations noted for this report.

MWLS55SA (*Custody Children Remaining in Same Out of Home Placement Following an Investigation*)

Percentage of Report-Related Discrepancies: 0.20%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Of the sample of 56 cases that were validated in July 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

There were no other observations noted for this report.

MWZWCR3 (*Frequency of Caseworker Visits with Parents/Caregiver with Whom Children are to be Reunified*))

Percentage of Report-Related Discrepancies: 1.60%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 331 cases that were validated in July 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

There were no other observations noted.

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MWZPLMB (*Frequency of Caseworker Visits with therapeutic Foster Parents with Whom Custody Children are placed*)

Percentage of Report-Related Discrepancies: 4.14%

Percentage of User/Entry-Related Discrepancies: 1.38%

Most Commonly Noted User/Entry-Related Discrepancies:

Of the sample of 137 cases that were validated, there were 17 cases (1.38%) with user entry related discrepancies. For this report, validators noted that the information in the narrative did not always match the information on the MACWIS placement screens.

Suggestions for Improving Data Quality:

- The same suggestions noted above for MWLS54A for addressing the user errors apply to this report as well.

Other Observations

There were no other observations noted for this report.

MWZPLMC (*Frequency of Caseworker Visits with Non-Therapeutic Foster Parents with Whom Custody Children are Placed*)

Percentage of Report-Related Discrepancies: 0.30%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the review sample of 328 cases that were validated in July 2013, there were no cases (0%) with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

There were no other observations noted.

MWBRD06 (*Rate of Maltreatment in Care*)

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0.29%

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Most Commonly Noted User/Entry-Related Discrepancies:

Of the review sample of 229 cases that were validated in July 2013, there were six cases (0.29%) identified with user entry related discrepancies. The data validation revealed in some instances, the biological parents were selected as alleged perpetrators, when they were not.

Suggestions for Improving Data Quality:

- The same suggestions noted above for MWLS54A for addressing the user errors apply to this report as well.

Other Observations

Validators noted a case on the report with the same allegations, involving the same children for an incident that occurred on the same date. It was unclear why the case was accepted for an investigation and not screened out.

MWZWC5D *Children in Out of Home Care Contact with Worker – Seen Alone)*

Percentage of Report-Related Discrepancies: 1.30%

Percentage of User/Entry-Related Discrepancies: 1.41%

Most Commonly Noted User/Entry-Related Discrepancies:

Of the sample of 343 cases that were validated in July 2013, there were 29 (1.41%) user entry related discrepancies. The validation of the data revealed two main user entry related discrepancies. In some instances, there was lack of clarity as to whether the assigned caseworker was a COR or COS caseworker. The other issue noted was the discrepancy between the information selected in the participant box and the narrative. For example, there were cases identified where the participants who were mentioned in the narrative were not selected in the participant box in MACWIS.

Suggestions for Improving Data Quality:

- The same suggestions noted above for MWLS54A for addressing the user errors apply to this report as well.

Other Observations

For this report, validators noted a sibling group of three where the children were seen, however, they were not seen alone as required. This is a practice-related issue that will be reinforced through practice model coaching activities going forward.

Automated supervisory report *(Count of Supervisors and their Assigned Caseworkers)*

Percentage of Report-Related Discrepancies: 1.17%

Percentage of User/Entry-Related Discrepancies: 0%

The Regional Directors conducted a 100% review of the Automated Supervisory report, after which CSF staff validated a sample of 43 supervisors and 93 cases workers from three Regions in the State. The validation revealed no (0%) user entry related discrepancies.

Most Commonly Noted User/Entry-Related Discrepancies:

Not applicable for this report.

Suggestions for Improving Data Quality:

Not applicable for this report.

Data Quality Report   September 2013

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
  - o User entry discrepancies
  - o Other observations

Reports Validated During September 2013

Newly Developed Reports[1]

- MWZPLM5S (*Children in care in less than 12 months should have had two or fewer placements*)
- MWBRD05 (*Children discharged and reunified in the last year should have been reunified within 12 months of latest removal*)
- MWBRD10 (*Children discharged in the last year on finalization of adoption should have had the adoption finalized within 24 months*)
- MWBRD16 (*Children in custody, ages 14 – 20, should be provided with Independent Living services as set forth in their service plans*)
- PAD 5 (*Children in custody, ages 14 – 20, should be provided with Independent Living services as set forth in their service plans*)
- MWZRESL (*Number of Licensed Foster Family Homes*)
- MWZRESPD (*Number of Pending Foster Family Homes*)

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[1] These reports were developed during September 2013 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

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- MWZ0510 (*Number of Children in Foster Care by Placement Type*)
- MWZ1271G (*Investigation of children in custody initiated within 24 hours and completed within 30 days*)
- MWLS312D (*Child's permanency plan will be developed within 30 calendar days of initial placement and documented in child's case record*)
- PAD 19 (*Child's permanency plan will be developed within 30 calendar days of initial placement and documented in child's case record*)
- PAD 2 (*DFCS caseworker will visit the home of non-therapeutic resource parents, at least once a month*)
- PAD 3 (*DFCS caseworker will visit the home of therapeutic foster parents, at least once a month*)
- Caseload Count of Dedicated Workers (*Caseworker will carry a caseload that does not exceed plan requirements*)

Findings of Individual Report Validation

MWZPLM5S (*Children in care in less than 12 months should have had two or fewer placements*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies[2]: 0%

Percentage of User Entry-Related Discrepancies[3]: 0%

Most Commonly Noted User Entry-Related Discrepancies:

Out of the sample of 327 cases the validators reviewed in September 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

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[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

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Other Observations

The validators did not make any other observations for this report.

MWBRD05 (*Children discharged and reunified in the last year should have been reunified within 12 months of latest removal*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 293 cases the validators reviewed in September 2013, there were no cases (0%) identified with user related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

The validators did not make any other observations for this report.

MWBRD10 (*Children discharged in the last year on finalization of adoption should have had the adoption finalized within 24 months*)

Percentage of Report-Accuracy: 99.94%

Percentage of Report-Related Discrepancies: 0.06%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample 174 cases the validators reviewed in September 2013, there were no cases (0.0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

3

The validators did not make any other observations for this report.

MWBRD16/PAD 5 (*Children in custody, ages 14 – 20, should be provided with Independent Living services as set forth in their service plans*)

Percentage of Report-Accuracy: 99.74%

Percentage of Report-Related Discrepancies: 0.26%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 312 cases the validators reviewed in September 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

The validators did not make any other observations for this report.

PAD 5 (*Children in custody, ages 14 – 20, should be provided with Independent Living services as set forth in their service plans*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 5.77%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 91 cases the validators reviewed in September 2013, there were 21 cases (5.77 %) identified with user entry related discrepancies. The validators identified cases in which the reviewers selected a "no" answer in instances where the child was not receiving Independent Living services; however the review of the comment box of the PAD in MACWIS revealed no information to support the "no" answers as required by the PAD guidelines.

Suggestions for Improving Data Quality:

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Since these user-related errors were attributable to FCR reviewer entries, a stringent supervisory review of the reviewers' entries should be ensured for all reviewers.

Other Observations

The validators identified some cases in which the PADs could not be located.

MWZRESL (*Number of Licensed Foster Family Homes*)

Percentage of Report-Accuracy: 98.42%

Percentage of Report-Related Discrepancies: 1.58%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 303 cases the validators reviewed in September 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

The validators did not make any other observations for this report.

MWZRESPD (*Number of Pending Foster Family Homes*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0.06%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 284 cases the validators reviewed in September 2013, there were 26 cases (0.06%) identified with user entry related discrepancies. The validators identified several inquiries on the same resource parents. Many of those inquiries occurred on the same date, whereas others occurred within approximately two days of each other.

Suggestions for Improving Data Quality:

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- Each county should consider enhancing their current screening process that is completed prior to entering any new information in MACWIS.
- Each county, in collaboration with the MACWIS team, should consider initiating a data cleansing process by which they identify, review and merge duplicate cases, if applicable.

Other Observations

The validators did not make any other observations for this report.

MWZ0510 (*Number of Children in Foster Care by Placement Type*)

Percentage of Report-Accuracy: 99.14%

Percentage of Report-Related Discrepancies: 0.86%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 352 cases the validators reviewed in September 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality:

Not applicable for this report.

Other Observations

The validators did not make any other observations for this report.

MWZ1271G (*Investigation of children in custody initiated within 24 hours and completed within 30 days*)

Percentage of Report-Accuracy: 99.56%

Percentage of Report-Related Discrepancies: 0.44%

Percentage of User/Entry-Related Discrepancies: 0.22%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 100 cases the validators reviewed in September 2013, there were two cases (0.22%) identified with user entry related discrepancies. In those cases, the validators noticed that those children were not listed as participants in the narrative.

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Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews, should ensure that any children listed in the participant box of MACWIS are also reflected in the narrative. We will share the information in this report with the Training Sub-Team of the State Implementation Team to determine how this type of information may be best conveyed to the supervisors and in which format.

Other Observations

The validators did not make any other observations for this report.

MWLS312D/PAD 19 (*Child's permanency plan will be developed within 30 calendar days of initial placement and documented in child's case record*)

Percentage of Report-Accuracy: 98.57%

Percentage of Report-Related Discrepancies: 1.43%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 244 cases the validators reviewed in September 2013, there were no cases (0%) identified with user entry related discrepancies.

Suggestions for Improving Data Quality

Not applicable for this report.

Other Observations

The validators did not make any other observations for this report.

PAD 19 (*Child's permanency plan will be developed within 30 calendar days of initial placement and documented in child's case record*)

Percentage of Report-Accuracy: 98.8%

Percentage of Report-Related Discrepancies: 1.20%

Percentage of User/Entry-Related Discrepancies: 1.05%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 246 cases the validators reviewed in September 2013, there were 18 cases (1.05%) identified with user entry related discrepancies. The validators identified cases in which the reviewers selected "yes" to the FTM was held within 30 days of entry to develop the child's plan (Q10) while selecting an "*" for (Q11) to indicate that the plan was not developed within 30 days of entry. In other cases, the reviewers selected "no" to (Q10) while selecting "yes" to (Q11). A "yes" answer to (Q 11) is contingent on a "yes" answer to (Q10).

Suggestions for Improving Data Quality:

Since these user-related errors were attributable to FCR reviewer entries, a stringent supervisory review of the reviewers' entries should be ensured for all reviewers.

Other Observations

The validators did not make any other observations for this report.

PAD 2 *(DFCS caseworker will visit the home of non-therapeutic resource parents, at least once a month)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0.80%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 322 cases the validators reviewed in September 2013, there were 18 cases (0.80%) identified with user entry related discrepancies. The validators identified cases in which the reviewers selected a "no" answer as to whether there were discussions about the child's needs with the resource parents. In many instances with a "no" answer, there were no explanations documented in the comment box as required by the PAD guidelines. In other instances, the validators noted "yes" answers, but the review of the narrative did not support a "yes" answer. For example, the review of the narrative indicated that the agency did not comply with the required content of the monthly visits; however, the answer to the question indicated otherwise.

Suggestions for Improving Data Quality:

Supervisory controls and review of reviewers' completed PADs should ensure that appropriate explanations are provided, as required by PAD guidelines.

Other Observations

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The validators identified one case in which the reviewer answered "yes" as to the required monthly contact with the resource caregiver, even though it was a phone contact.

PAD 3 (*DFCS caseworker will visit the home of therapeutic foster parents, at least once a month*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0.11%

Most Commonly Noted User/Entry-Related Discrepancies:

Out of the sample of 128 cases the validators reviewed in September 2013, there was one case (0.11 %) identified with user entry related discrepancies. The validator identified a case in which the questions about the child's placement and the content of the monthly contact with the resource caregiver were not answered.

Suggestions for Improving Data Quality:

Supervisory controls and review should ensure that appropriate documentation has been provided in the PAD by all reviewers.

Other Observations

The validators did not make any other observations for this report.

Caseload Count of Dedicated Workers (*Caseworker will carry a caseload that does not exceed plan requirements*)

Percentage of Report-Accuracy: 99.85%

Percentage of Report-Related Discrepancies: 0.15%

Percentage of User/Entry-Related Discrepancies: 0.03%

Most Commonly Noted User/Entry-Related Discrepancies:

The validation of this report occurred in September 2013 and consisted of a 100% review of all caseloads. The result of the validation revealed one user entry related discrepancy in which the caseworker created a Family Service Plan (FSP) instead of ending the direct service. The

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caseworker deleted the direct service on the new FSP, which left an active record on the previous FSP.

Suggestions for Improving Data Quality:

In order to address this issue, MIS would have to change the status of the direct service to close and add an end date and outcome. This will require a Heat ticket.

Other Observations

The validator did not make any other observations for this report.

Data Quality Report   October 2013

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
    - o User entry discrepancies
    - o Other observations

Reports Validated During October 2013

Newly Developed Reports[1]

- MWLS319D/PAD7 (*Children should not be placed in a foster care setting that has not been licensed or approved unless placed pursuant to relative licensing process*)
- MWLS315 (*Children entering foster care should receive a health screening evaluation within 72 hours of placement and a comprehensive assessment within 30 days of placement*)
- MWZTACR/PAD4 (*A child's plan will be reviewed in a court or administrative case review at least every six months*)
- MWZTPHR (*A court review should be held for children in custody within 12 months of initial placement and annually thereafter*)

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[1] These reports were developed during October 2013 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

- MWZ017D (*Children reaching their 17th month of the previous 22 months in foster care during the period should have a TPR petition filed or exception documented by the last day of the 17th month*)
- MWLS50D (*No child should remain in an emergency/temporary facility for more than 45 calendar days*)
- MWLS52HS (*No child under 10 will be placed in a congregate care setting unless the child has exceptional needs that cannot be met in a relative or foster home*)
- PAD6 (*Children in custody are provided with contacts with their parents/siblings not in the same placement within 24 hours of placement*)

Findings of Individual Report Validation

MWLS319D (*Children should not be placed in a foster care setting that has not been licensed or approved unless placed pursuant to relative licensing process*).

Percentage of Report-Accuracy: 98.96%

Percentage of Report-Related Discrepancies[2]: 1.04%

Percentage of User Entry-Related Discrepancies[3]: 0.09%

Most Commonly Noted User Entry-Related Discrepancies:

This report consists of a sample of 233 cases with nine data points. Out of this sample, the validators identified two occurrences (0.09%) of user entry related discrepancies. The validators identified cases in which the documentation in MACWIS indicated that the children were no longer in custody; however, the review of the placement and custody screens in MACWIS revealed that the placement and custody screens needed to be updated to reflect the children's current legal and placement status.

Suggestions for Improving Data Quality:

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[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

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Supervisors, as part of their regular case reviews and case staffings should ensure that legal and placement status are current in MACWIS.

Supervisors should consider initiating a targeted review process by which they will periodically review legal and placement screens to ensure accuracy and timely updates.

Other Observations

This section is not applicable for this report.

PAD7 (*Children should not be placed in a foster care setting that has not been licensed or approved unless placed pursuant to relative licensing process*).

Percentage of Report-Accuracy: 99.89%

Percentage of Report-Related Discrepancies[4]: 0.11

Percentage of User Entry-Related Discrepancies[5]: 0%

Most Commonly Noted User Entry-Related Discrepancies:

This report consists of a sample of 336 cases with five data points. Out of this sample, the validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

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[4] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[5] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

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MWLS315 (*Children entering foster care should receive a health screening evaluation within 72 hours of placement and a comprehensive health assessment with 30 days of placement*)

Percentage of Report-Accuracy: 99.90%

Percentage of Report-Related Discrepancies: 0.10%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 333 cases with nine data points. Out of this sample, the validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report

Other Observations:

This section is not applicable for this report.

MWZTACR (*A child's plan will be reviewed in a court or administrative case review at least every six months*)

Percentage of Report-Accuracy: 99.58%

Percentage of Report-Related Discrepancies: 0.42%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 354 cases with eight data points. Out of this sample, the validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

PAD4 (*A child's plan will be reviewed in a court or administrative case review at least every six months*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 339 cases with nine data points. Out of this sample, the validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report

Other Observations:

This section is not applicable for this report.

MWZTPHR (*A court review should be held for children in custody within 12 months of initial placement and annually thereafter*)

Percentage of Report-Accuracy: 99.64%

Percentage of Report-Related Discrepancies: 0.36%

Percentage of User/Entry-Related Discrepancies: 0.65%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 343 cases with eight data points. Out of this sample, the validators identified 18 (0.65%) occurrences of user entry related discrepancies. The cases that the validators identified are cases in which the adjudication and disposition hearings were not entered in MACWIS.

Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews and staffings should ensure that hearings are entered in MACWIS to reflect any legal actions taken on the case.

Other Observations:

This section is not applicable for this report.

5

MWZ017D *(Children reaching their 17ᵗʰ month of the previous 22 months in foster care during the period should have a TPR petition filed or exception documented by the last day of the 17ᵗʰ month)*

Percentage of Report-Accuracy: 99.22%

Percentage of Report-Related Discrepancies: 0.78%

Percentage of User/Entry-Related Discrepancies: 0.10%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 313 cases with nine data points. Out of this sample, the validators identified three (0.10%) occurrences of user entry related discrepancies. These cases represent cases in which the date the child was freed for adoption was not entered in MACWIS.

Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews and case staffings, should ensure that legal actions are current in MACWIS.

Other Observations:

The validators identified three cases in which they were unable to view the Adoption and Safe Families Act (ASFA) exceptions.

MWLS50D *(No child should remain in an emergency/temporary facility for more than 45 calendar days)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 7.46%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 28 cases with 11 data points. Out of this sample, the validators identified 23 (7.46%) occurrences of user entry related discrepancies. The cases identified with user related discrepancies were cases in which the review of the placement screens in MACWIS indicated that the child was still in the placement; however, the narrative in MACWIS revealed that the child was discharged from that placement.

6

Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews and case staffings should ensure that placement screens are updated in MACWIS. In addition, given the high user entry-related error rate for this indicator, MDHS might consider issuing a general reminder to all staff encouraging timely updating of discharges from placement settings in MACWIS.

Other Observations:

This section is not applicable for this report.

MWLS52HS *(No child under 10 will be placed in a congregate care setting unless the child has exceptional needs that cannot be met in a relative or foster home.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 4.75%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of 82 cases with 10 data points. The validators identified 39 (4.75%) occurrences of user entry related discrepancies. The most commonly noted user entry discrepancies were cases in which the child's exceptional needs were not documented in MACWIS. Additionally, the validators identified other cases in which the placement screens were not updated.

Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews and case staffings, should ensure that caseworkers document and describe in MACWIS the child's exceptional needs to justify instances when a child who is under ten has to be placed in a congregate care setting. Similar to the prior report, a reminder to staff to update MACWIS on this indicator should be issued.

Other Observations:

The validators noted in some cases that the age of the child listed in the report was the child's current age and not the age the child was at the time of placement.

PAD6 *(Children in custody are provided with contacts with their parents/siblings not in the same placement within 24 hours of placement).*

7

Percentage of Report-Accuracy: 99.61%

Percentage of Report-Related Discrepancies: 0.39%

Percentage of User/Entry-Related Discrepancies: 2.59%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of a sample of 224 cases with 16 data points. The validators identified 93 (2.59%) occurrences of user entry related discrepancies. The most commonly noted user entry related discrepancies were cases in which the validators did not find any comments in the Periodic Administrative Determination (PAD) or in the County Conference box in MACWIS to explain any "NA" answers as required by the (PAD) guidelines. For example, if the answer to whether a child had visited with the mother within 24 hours is "NA", the PAD guidelines requires the reviewer to provide an explanation.

Suggestions for Improving Data Quality:

Since these user entry related errors were attributable to FCR reviewer entries, a stringent supervisory review of the reviewers' entries should be ensured for all reviewers in addition to emphasizing this error in FCR reviewer training.

Other Observations:

This is not applicable for this report.

Data Quality Report   **November 2013**

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
    - User entry discrepancies
    - Other observations

Reports Validated During November 2013

Newly Developed Reports[1]

- MWLS314 (*Children should be placed within their own county or within 50 miles of the home from which they were removed.*)
- MWLS316 (*Siblings who enter placement at/near the same time are placed together.*)
- MWLS51D (*No child should be placed in more than one emergency or temporary facility within one episode of foster care.*)
- SLS53H (*Sibling groups, in which there is at least one sibling under age 10, will not be placed in congregate care settings for more than 45 days.*)
- PAD 17 (*Each foster child requiring therapeutic and rehabilitative foster care services because of a diagnosis of significant medical, developmental, emotional, or behavioral should be provided with a treatment plan and should be provided with these services in accordance with the plan.*)

- PAD 20 (*The service plan should be reviewed and updated quarterly or more frequently as needed, including within 30 days of a placement change.*)

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[1] These reports were developed during November 2013 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

1

- PAD 21 *(No child should be assigned a permanency goal of durable legal custody unless there are documented efforts in the child's case record to move the child to adoption and documentation of reasonable basis why it is in the child's best interest not to be considered for adoption.)*
- PAD 22 *(For children with a goal of reunification, DFCS will engage in concurrent planning within the 1st 6 months of custody.)*
- PAD 23 *(Youth in custody transitioning to independence should have available: an adequate living arrangement, a source of income, health care, IL stipends, education/training vouchers.)*
- PAD 25 *(Children four years or older, should be provided a mental health assessment by a qualified professional within 30 calendar days of foster care placement.)*
- PAD 26 *(Children, birth to three years, should be provided with a developmental assessment by a qualified professional and each child older than age three should have a developmental assessment if factors indicate such an assessment is warranted.)*
- AR1 *(Workload Report)*

Findings of Individual Report Validation

MWLS314 *(Children should be placed within their own county or within 50 miles of the home from which they were removed.)*

Percentage of Report-Accuracy: 99.69%

Percentage of Report-Related Discrepancies[2]: 0.31%

Percentage of User Entry-Related Discrepancies[3]: 1.09%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 346 cases with 10 data points. The validators identified 38 (1.09%) occurrences of user entry related discrepancies. The validators identified cases in which the placement screens were not current.

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[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews and case staffings should ensure that placement screens are current in MACWIS. Supervisors should also review the excel spreadsheet associated with this report and use it as a reference to update the cases identified.

Other Observations:

The validators identified 11 cases in which the state office is listed as the county of placement.

MWLS316 (*Siblings who enter placement at/near the same time are placed together.*)

Percentage of Report-Accuracy: 99.78%

Percentage of Report-Related Discrepancies[4]: 0.22%

Percentage of User Entry-Related Discrepancies[5]: 3.90%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 490 cases with eight data points. The validators identified 153 (3.90%) occurrences of user entry related discrepancies. The validators identified cases in which there were no documented exceptions to justify why siblings were not initially placed together. In other instances, the radio button to indicate that siblings were initially placed together was checked; however, the review of the placement screens revealed that those children were not initially placed together.

Suggestions for Improving Data Quality:

A MACWIS refresher training to address the identified user entry related discrepancies is recommended.

Supervisors, as part of their regular case reviews and staffings, should ensure that caseworkers document all applicable exceptions when siblings are not initially placed together, along with reviewing the excel spreadsheet associated with this report monthly.

Other Observations:

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[4] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[5] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

The validators identified cases in which the name of the facility where the child was placed was not on the report.

MWLS51D *(No child should be placed in more than one emergency or temporary facility within one episode of foster care.)*

Percentage of Report-Accuracy: 98.35%

Percentage of Report-Related Discrepancies: 1.65%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 65 cases with 11 data points. The validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

SLS53HS *(Sibling groups, in which there is at least one sibling under age 10, will not be placed in congregate care settings for more than 45 days.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 73 cases with 10 data points. The validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

PAD 17 (*Each foster child requiring therapeutic and rehabilitative foster care services because of a diagnosis of significant medical, developmental, emotional, or behavioral should be provided with a treatment plan and should be provided with these services in accordance with the plan.*)

Percentage of Report-Accuracy: 99.90%

Percentage of Report-Related Discrepancies: 0.10%

Percentage of User/Entry-Related Discrepancies: 3%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 276 cases with 10 data points. The validators identified 83 (3%) occurrences of user entry related discrepancies. The validators identified cases in which the child's diagnosis was not listed in the medical condition screen in MACWIS.

Suggestions for Improving Data Quality:

Supervisors, as part of their regular case reviews and staffings, should ensure that caseworkers update the child's diagnosis in the medical condition screen in MACWIS. Information should also be provided to foster care reviewers regarding recording diagnoses when indicated.

Other Observations:

The validators identified cases in which the report indicates that the child has a disability, but the review of the medical condition screen, the PAD comment box and county conference box did not provide any information to support a "Yes" answer.

PAD 20 (*The service plan should be reviewed and updated quarterly or more frequently as needed, including within 30 days of a placement change.*)

Percentage of Report-Accuracy: 99.89%

Percentage of Report-Related Discrepancies: 0.11%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 339 cases with 10 data points. The validators identified no (0%) occurrences with user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report.

Other Observations:

The validators identified 10 cases with blank PADs.

PAD 21 *(No child should be assigned a permanency goal of durable legal custody unless there are documented efforts in the child's case record to move the child to adoption and documentation of reasonable basis why it is in the child's best interest not to be considered for adoption.)*

Percentage of Report-Accuracy: 99.76%

Percentage of Report-Related Discrepancies: 0.24%

Percentage of User/Entry-Related Discrepancies: 0.47%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 340 cases with five data points. The validators identified eight (0.47%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers indicated that the child's permanency goal was not appropriate (Q82); however, did not provide an explanation in the comment box in MACWIS to support their answers, as required by the PAD guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

The validators identified cases in which the Family Service Plan (FSP) needs to be updated to reflect the family's current circumstances. In addition, the validators identified other instances in which the child's permanency goal is incongruent with information in the PAD (Q82) comment box. For example, there were cases in which the permanency goal was reunification, but the review of the comments revealed a permanency goal of adoption.

PAD 22 *(For children with a goal of reunification, DFCS will engage in concurrent planning within the 1st 6 months of custody.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

6

This report sample consists of 234 cases with seven data points. The validators identified no (0%) occurrences of user entry related discrepancies.

Suggestions for Improving Data Quality:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

PAD 23 *(Youth in custody transitioning to independence should have available: an adequate living arrangement, a source of income, health care, IL stipends, education/training vouchers.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 18.23%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 78 cases with nine data points. The validators identified 128 (18.23%) occurrences of user entry related discrepancies. For questions (Q73), (Q74), (Q75) and (Q76), the PAD guidelines require the FCR reviewers to comment on any "Yes" or "No" answers. The cases that were identified were cases in which the reviewers did not provide any information in the comment box to support the "Yes" or "No" answers.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

This section is not applicable for this report.

PAD 25 *(Children four years or older, should be provided a mental health assessment by a qualified professional within 30 calendar days of foster care placement.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 4.55%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 246 cases with five data points. The validators identified 56 (4.55%) occurrences with user entry related discrepancies. The validators identified cases in which the FCR reviewers answered "No" for cases that are not applicable because the child is under the age of three. Since MACWIS does not provide a "NA" option, the FCR reviewers should have answered "Yes" for those cases.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

The validators identified cases in which the FCR reviewers indicated that the mental health assessments were completed timely; however, the review of the medical tab revealed no indication that they were timely.

PAD 26 *(Children, birth to three years, should be provided with a developmental assessment by a qualified professional and each child older than age three should have a developmental assessment if factors indicate such an assessment is warranted.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0.96

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 156 cases with six data points. The validators identified nine (0.96) occurrences with user entry related discrepancies. The most commonly noted user entry related discrepancies were cases in which the reviewers responded with a "NA" answer to the question as to whether the child had received a mental assessment by a qualified professional; but further review of MACWIS revealed that the child is less than three. Therefore, a "NA" answer to (Q39A) would have been more accurate based on the PAD guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

This section is not applicable for this report.

AR1 *(Workload Report)*

Percentage of Report-Accuracy: 99.84%

Percentage of Report-Related Discrepancies: 0.16%

Percentage of User/Entry-Related Discrepancies: 0.13%

Percentage of Other Observed Discrepancies 0.10%

Most Commonly Noted User/Entry-Related Discrepancies:

This report consists of 13,255 lines of service with 7 data points. The validators identified 122 cases with user entry related discrepancies. The validators identified cases in which the case service type was incorrect. For example, the report generated from MACWIS showed that the service type as "Placement COR"; however, the review of those cases revealed that the service type should have been coded as "Placement R&S". In addition, the validators identified other instances where the supervisor is listed with no worker selected on the direct service case, which causes the service type to show on the report with the regional director as supervisor and the supervisor as the caseworker. These were data entry errors because the COR worker neglected to enter his/her own name on the direct service line on the Family Service Plan (FSP). During the validation process, the validators also began to correct the issues identified with notification and training. These cases were on the COR worker's workload screen as being assigned to him/her, so the case was being handled by this worker.

Suggestions for Improving Data Quality:

In order to address the issues with the selection of the correct service type, DFCS is considering the addition of a MACWIS enhancement in the Family Service Plan (FSP) that would support the caseworker in selecting the correct direct service for the person selected and the correct supervisor for the direct service. Furthermore, the recent MACWIS enhancement will prevent supervisors from approving the Family Service Plan (FSP) in cases where no caseworker is entered on the worker field on the direct service line.

Other Observations:

There were 96 cases identified with a MACWIS issue. The majority of these were because the FSP was not creating the appropriate COS worker record on the Assign/Transfer screen. Nor was it sending a tickler to the COS ASWS to assign the COS worker. This issue was corrected in MACWIS so going forward, this problem should not occur. Steps are being taken to correct the existing cases with this problem.

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Data Quality Report

December 2013

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
  - User entry discrepancies
  - Other observations

Reports Validated During November 2013

Newly Developed Reports[1]

- PAD 8 *(Children with special needs should be matched with placement resources that can meet their therapeutic and medical needs.)*
- PAD 9 *(Each foster child should be placed in the least restrictive setting that meets his/her individual needs as determined by a review of all intake, screening, assessment and prior placement information on the child available at the time of placement.)*
- PAD 12 *(Children should have a family assessment completed within 30 calendar days of the child's entrance into custody which is documented in the child's case record.)*
- PAD 15 *(DFCS caseworkers will screen children for general/special educational needs within 30 calendar days of his or her entry into foster care.)*
- PAD 24 *(Children in custody will receive periodic medical exams and all medically necessary follow-up services/treatment throughout the time they are in State custody.)*
- PAD 27m1 *(Every child three years and older should receive a dental exam within 90 days of foster care placement and every six months thereafter.)*

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[1] These reports were developed during November 2013 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

- PAD 27m2 *(Children reaching age three in care, should be provided with a dental exam within 90 days of his/her 3ʳᵈ birthday and every six months thereafter.)*

Findings of Individual Report Validation

PAD 8 *(Children with special needs should be matched with placement resources that can meet their therapeutic and medical needs.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies[2]: 0%

Percentage of User Entry-Related Discrepancies[3]: 12.19%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 220 cases with six data points. The validators identified 161(12.19%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers did not cite the source of the child's diagnosis for (Q120), as required by the Periodic Administrative Determination (PAD) guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

The validators identified cases in which the children were placed in a pre-adoptive home, but there were no evidence documented to indicate that matching occurred.

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[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

PAD 9 (*Each foster child should be placed in the least restrictive setting that meets his/her individual needs as determined by a review of all intake, screening, assessment and prior placement information on the child available at the time of placement.*)

Percentage of Report-Accuracy: 99.95%

Percentage of Report-Related Discrepancies[4]: 0.05%

Percentage of User Entry-Related Discrepancies[5]: 5.73%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 338 cases with five data points. The validators identified 97 (5.73%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers did not provide a descriptive comment to support why the child's placement was least restrictive, as required by the PAD guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

This section is not applicable for this report.

PAD 12 *(Children should have a family assessment completed within 30 calendar days of the child's entrance into custody which is documented in the child's case record.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 6.20%

Most Commonly Noted User/Entry-Related Discrepancies:

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[4] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[5] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

3

This report sample consists of 258 cases with four data points. The validators identified 64 (6.20%) occurrences of user entry related discrepancies. The validators identified cases in which there were no summaries in the comment box of MACWIS of the evidence used to determine if the Child and Family Assessment (CFA) was completed within 30 calendar days of custody, as required by the PAD guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

This section is not applicable to this report.

PAD 15 *(DFCS caseworkers will screen children for general/special educational needs within 30 calendar days of his or her entry into foster care.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 5.42%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 258 cases with four data points. The validators identified 56 (5.42%) occurrences of user entry related discrepancies. The validators identified cases in which the child was not school age and the FCR reviewers responded "No" to the (Q12). At this time, MACWIS does not give the FCR reviewers the option to select "NA" when the child is not school age. Since "NA" for (Q12) is not a current selection in MACWIS, the FCR reviewers should have selected "Yes" to that answer.

Suggestions for Improving Data Quality:

A MACWIS enhancement is recommended to add the "NA" option for (Q12).

Other Observations:

This section is not applicable for this report.

PAD 24 (*Children in custody will receive periodic medical exams and all medically necessary follow-up services/treatment throughout the time they are in State custody.*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 5.58%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 339 cases with four data points. The validators identified 35 (2.58%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers indicated that there were lack of supporting documentation to indicate that the child received medical services, but the review of the medical tab in MACWIS revealed that the child received medical services within the required timeframe. In other instances, the FCR reviewers did not provide any information in the comment box of MACWIS for any "No" answers, as required by the PAD guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

This section is not applicable for this report.

PAD 27m1 (*Every child three years and older should receive a dental exam within 90 days of foster care placement and every six months thereafter.*)

Percentage of Report-Accuracy: 99.85%

Percentage of Report-Related Discrepancies: 0.15%

Percentage of User/Entry-Related Discrepancies: 2.01%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 258 cases with five data points. The validators identified 26 (2.01%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers did not provide an explanation in MACWIS for "NA" and "No" answers for (Q14A), as required by the PAD guidelines.

Suggestions for Improving Data Quality:

5

Other Observations:

This section is not applicable to this report.

PAD 27m2 *(Children reaching age three in care, should be provided with a dental exam within 90 days of his or her 3ʳᵈ birthday and every six months thereafter.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 2.63%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 242 cases with seven data points. The validators identified 63 (2.63%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers did not provide any comments in MACWIS for "No" answers for (Q50B), as required by the PAD guidelines.

Suggestions for Improving Data Quality:

A refresher training is recommended for the FCR reviewers. The training should include a review of the PAD guidelines and PAD documentation in MACWIS.

Other Observations:

This section is not applicable for this report.

Data Quality Report   January 2014

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
    - o User entry discrepancies
    - o Other observations

Reports Validated During January 2014

Newly Developed Reports[1]

- PAD 10 *(No later than time of placement, DFCS will provide resource parents/facility staff with foster child's current available medical, dental, educational and psychological information.)*
- PAD 11 *(DFCS will take all reasonable steps to avoid disruption of appropriate placements and ensure placement stability; if worker has knowledge of disruption possibility, he/she must convene a FTM immediately.)*
- PAD 16 *(DFCS should take reasonable steps to ensure that school-age foster children are registered for and attending accredited schools within three business days of initial placement or other placement changes, including while placed in shelters or temporary placements.)*

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[1] These reports were developed during January 2014 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

Findings of Individual Report Validation

PAD 10 *(No later than time of placement, DFCS will provide resource parents/facility staff with foster child's current available medical, dental, educational and psychological information.)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies[2]: 0%

Percentage of User Entry-Related Discrepancies[3]: 1.83%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 273 cases with five data points. The validators identified 25 (1.83%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers selected an (*) NA (child on home trial placement) for (Q17), however the review of the placement screen indicates that the child was not on home trial placement.

Suggestions for Improving Data Quality:

Since these user entry related errors were attributable to FCR reviewer entries, a stringent supervisory review of the reviewers' entries should be ensured for all reviewers in addition to emphasizing this error in FCR reviewer training.

It is worth noting that several steps were taken to improve data quality and decrease the frequency of data entry errors for PAD 10. Formerly, (Q17) was the only question aimed at answering whether or not foster parents receive pertinent information regarding the children in their home within 15 days of placement. In order to ensure that this question was being answered for both initial and subsequent placements, (Q9) was added to the initial PAD tab. With this new enhancement, reviewers will be able to answer those questions separately.

Other Observations:

The validators identified cases in which the medical, dental and psychological information were not current.

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[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

PAD 11 (*DFCS will take all reasonable steps to avoid disruption of appropriate placements and ensure placement stability; if worker has knowledge of disruption possibility, he/she must convene a FTM immediately.*)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies[4]: 0%

Percentage of User Entry-Related Discrepancies[5]: 8.45%

Most Commonly Noted User Entry-Related Discrepancies:

This sample report consists of 71 cases with five data points. The validators identified 30 (8.45%) occurrences of user entry related discrepancies. The validators identified cases in which the FCR reviewers selected an "*" (NA) for (Q26) in instances in which (Q25) is "No". The PAD guidelines only allows for an "*" or (NA) answer if (Q25) is "Yes".

Suggestions for Improving Data Quality:

Since these user entry related errors were attributable to FCR reviewer entries, a stringent supervisory review of the reviewers' entries should be ensured for all reviewers. Additionally, several steps have been taken to address the data entry errors in PAD 11 during the FCR PAD workshop held on February 12, 2014 . First, the topics of (Q25) and (Q26) were covered during the FCR PAD workshop. The workshop addressed with the FCR reviewers the need to answer "Yes" or "No" to (Q26) if (Q25) was answered "No". Second, in order to ensure that reviewers are considering both the current placement and whether it is at risk of disrupting as well as any other placements that occurred in the PUR, the language to (Q25) was updated and guidance was given to reviewers to support the change. Finally, in the FCR PAD workshop, (Q26) was highlighted as a question that when the answer is "No" , reviewers are required to document an explanation in the comment box of MACWIS and submit corrective action to the FCR supervisor.

Other Observations:

This section is not applicable to this report.

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[4] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[5] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

PAD 16 *(DFCS should take reasonable steps to ensure that school-age foster children are registered for and attending accredited schools within three business days of initial placement or other placement changes, including while placed in shelters or temporary placements .)*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 1.62%

Most Commonly Noted User/Entry-Related Discrepancies:

This sample report consists of 339 cases with six data points. The validators identified 33 (1.62%) occurrences of user entry related discrepancies. The validators identified cases in which the reviewers selected "No" for (Q16), but did not provide any comments in MACWIS as required by the PAD guidelines.

Suggestions for Improving Data Quality:

An update in the PAD guidelines to remove the current requirement of providing a comment when a child is not school aged or when a placement move occurred during the summer months is recommended. This update will decrease the frequency of user entry related discrepancies for this question.

Other Observations:

The validators identified a case that did not have any PADs listed.

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DATA QUALITY REPORT
FEBRUARY 2014 -MVU

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
  - User entry discrepancies
  - Other observations

REPORTS VALIDATED DURING FEBRUARY 2014

Re-Validated Reports[1]

- SZ1271 (*Timeliness of Investigations for Custody Children*)
- SZPLMB (*Therapeutic Home Contacts*)
- SZPLMC (*Non-Therapeutic Home Contacts*)
- SZWC5 (*Visitation with Children*)
- SZWCR3 (*Visitation with Parents*)
- SZBRD06 (*Maltreatment Rate Custody Children*)
- SLS54 (*90 DAY TRIAL HOME VISIT*)
- SLS55 (*Visits w/Children in Placements Following Investigations*)
- AR2 (*Count of Supervisors and their Assigned Caseworkers*)

FINDINGS OF INDIVIDUAL REPORT VALIDATION

SZ1271 (TIMELINESS OF INVESTIGATIONS FOR CUSTODY CHILDREN)

Percentage of Report-Accuracy: 100%
Percentage of Report-Related Discrepancies[2]: 0%
Percentage of User Entry-Related Discrepancies[3]: .06%
Most Commonly Noted User Entry-Related Discrepancies:

1

This report sample consists of 118 cases with 14 data points. The validator identified one instance (.06%) where the caseworker did not enter the visit's participant name in the participant box of the narrative.

Other Observations:

From the sample of 118 cases, there were a total of 27 cases (23%) instances of untimely initiation or completion of the investigation.

SZPLMB (THERAPEUTIC HOME CONTACTS)

Percentage of Report-Accuracy: 99.6%
Percentage of Report-Related Discrepancies: .4%
Percentage of User Entry-Related Discrepancies: 1.67%
Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 133 cases with nine data points. The validators identified 20 *(1.67%)* occurrences of user entry related discrepancies. The validators identified cases in which the caseworker did not enter the visit's participant(s) in the participant's box of the narrative. However, the narrative indicates that the caretakers were seen, but because they were not listed in the participant's box, the report did not reflect that the visits were made.

Other Observations:

Of the 133 cases with nine data points, validators noted five (.4%) occurrences of Report-Related Discrepancies where the report did not pull all contact visits.

From the sample of 133 cases, 75 cases (56%) did not meet the monthly visit requirement with resource parent with one or more foster children in their home.

SZPLMC (NON-THERAPEUTIC HOME CONTACTS)

Percentage of Report-Accuracy: 99.7%
Percentage of Report-Related Discrepancies: .3%
Percentage of User/Entry-Related Discrepancies: 1.3%
Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 336 cases with eight data points. The validators identified 36 (1.3%) occurrences of user entry related discrepancies. The validators identified cases in which the caseworker entered the visit participant's name incorrectly or did not enter the visit's participant(s) in the participant's box of the narrative in MACWIS. However, the narrative indicates that the caretakers were seen, but because they were not listed in the participant's box, the report did not reflect that the visits were made.

Other Observations:

Validators noted eight (.3%) occurrences of Report-Related Discrepancies where the report pulled contact visits not applicable to the specification.

From the sample of 336 cases, 215 cases (64%) did not meet the monthly visit requirement with resource home with one or more foster children in their home.

SZC5D (VISITATION WITH CHILDREN)

Percentage of Report-Accuracy: 99.8%
Percentage of Report-Related Discrepancies: .2%
Percentage of User/Entry-Related Discrepancies: .0%
Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

Of a sample size of 345 cases with nine data points, validators noted seven (.2%) occurrences of Report-Related Discrepancies where the report did not pull all contact visits.

This report consists of a sample size of 345 cases. Of the sample, a total of ten (.3%) did not meet monthly visit requirements of at least twice monthly in which one visit per month shall take place in the child's placement.

SZBRD06 (MALTREATMENT RATE CUSTODY CHILDREN)

Percentage of Report-Accuracy: 100%
Percentage of Report-Related Discrepancies: 0%
Percentage of User/Entry-Related Discrepancies: 0%
Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

SLS54 (90 DAY TRIAL HOME)

Percentage of Report-Accuracy: 100%
Percentage of Report-Related Discrepancies: 0%
Percentage of User/Entry-Related Discrepancies: 0%
Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This report consists of a sample size of 130 cases. Of the sample, 16 cases (12%) did not meet the visit requirements of at least two visits per month with child without the parent or caretaker present.

SLS55 (VISITS W/CHILDREN IN PLACEMENTS FOLLOWING INVESTIGATION)

Percentage of Report-Accuracy: 99.1%
Percentage of Report-Related Discrepancies: 0.9%
Percentage of User/Entry-Related Discrepancies: 0%
Most Commonly Noted User/Entry-Related Discrepancies:

3

This section is not applicable for this report.

Other Observations:

This report consists of a sample size of 62 cases with eleven data points. Validators noted six (.10%) occurrences of Report-Related Discrepancies where the report did not pull all contact visits made by DFCS caseworker.

SZCR3 (VISITATION WITH PARENTS)

Percentage of Report-Accuracy: 100%
Percentage of Report-Related Discrepancies: 0%
Percentage of User/Entry-Related Discrepancies: 0%
Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

AR2 (WORKLOAD REPORT)

Percentage of Report-Accuracy: 100%
Percentage of Report-Related Discrepancies: 0%
Percentage of User/Entry-Related Discrepancies: 0.0%
Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

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[1] These reports were validated during February 2014 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

[2]Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

DATA QUALITY REPORT
MARCH 2014 -MVU

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
    o User entry discrepancies
    o Other observations

REPORTS VALIDATED DURING MARCH 2014

Re-Validated Reports[1]

- SBRD05 (*Reunification*)
- SZBRD10 (*Adoption Finalization*)
- SZRESP *(Pending Resource Homes)*
- S-PAD 5 *(Independent Living Services and Plan)*
- SZPLM5 *(Placement Stability)*
- SBRD16 (*Independent Living Services*)
- SZRESL *(License Status of Resource Family Homes)*
- SZ1271G (*Custody Children Investigation Completed*)
- S-PAD 3 *(Quality Therapeutic Visits with Foster Parent)*

1

FINDINGS OF INDIVIDUAL REPORT VALIDATION

SBRD05 (REUNIFICATION)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies[2]: 0%

Percentage of User Entry-Related Discrepancies[3]: 0%

Most Commonly Noted User Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

SZBRD10 (ADOPTION FINALIZATION)

Percentage of Report-Accuracy: 99.77%

Percentage of Report-Related Discrepancies: 0.23%

Percentage of User Entry-Related Discrepancies: 0%

Most Commonly Noted User Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

Of the 155 cases with eleven data points, validators noted four (.23%) occurrences of Report-Related Discrepancies where the report failed to pull ASWS/SW in MACWIS according to specification.

From the sample of 155 cases, 19 cases (12%) did not have a TPR file and/or request date documented in MACWIS; 119 cases (76%) of the same sample of 155 cases show that adoption were not finalized within 24 months.

SZRESP (PENDING RESOURCE HOMES)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

2

Percentage of User/Entry-Related Discrepancies: .04%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 281 cases with eight data points. The validators identified one (0.04%) occurrence of a user entry related discrepancy. The validator identified a case which the caseworker entered the child as head of the household.

Other Observations:

This section is not applicable for this report.

S-PAD5 (IL SERVICES AND PLAN)*9/1/2013 – 2/28/2014[4]

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 8%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 75 cases with five data points. The validators identified 30 (8%) occurrence of user entry related discrepancies. The validators identified instances where the FCRs did not document what evidence was found or not found during PUR to support a 'yes' or 'no' response to Question 70.

Other Observations:

This section is not applicable for this report.

SZPLM5 (PLACEMENT STABILITY)

Percentage of Report-Accuracy: 99.8

Percentage of Report-Related Discrepancies: 0.2%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

Of a sample size of 183 cases with five data points, validators noted two (.2%) occurrences of report-related discrepancies where the report pulled the wrong placement count.

3

SBRD16 (INDEPENDENT LIVING SERVICES)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: .3%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 312 cases with ten data points. The validators identified nine (.3%) occurrences of user entry related discrepancies. The validators identified instances where the workers incorrectly entered skills completed dates that were not captured in the applicable IL Plan in MACWIS.

Other Observations:

Of the sample of 312 cases, 32 cases (10%) show that the independent living assessments were not documented in MACWIS.

SZRESL (LICENSE STATUS OF RESOURCE FAMILY HOMES)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This section is not applicable for this report.

SZ1271G (CUSTODY CHILDREN INVESTIGATION COMPLETED)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: .45%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 61 cases with 11 data points. The validator identified three occurrences (.45%) of user-related discrepancies where the worker did not enter an initiation date.

Other Observations:

Of the 61 cases sampled, one case (1.63%) was identified as 'should have been screened out.'

S-PAD3 (QUALITY THERAPEUTIC VISITS WITH FOSTER PARENT)*9/1/2013 – 2/28/2014*

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: .6%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 131 cases with seven data points. The validators identified six (.6%) occurrences with user entry related discrepancies. The validators identified cases in which there were no indication that caseworker discussed services and permanency during monthly visits however FCR responded favorably (Yes) in respect to content of visits (Q103).

Other Observations:

This section is not applicable for this report.

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[1] These reports were validated during March 2014 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

[4] *This references the timeframe (*rolling six months*) from which the PAD Review was selected.

5

DATA QUALITY REPORT

APRIL 2014

Monthly, DFCS will produce a Data Quality Report that provides feedback to the field on the most common data quality issues identified in the data report validation process. The goal of providing this information is to improve the quality of data used in reports and to assist the field in using the data to improve outcomes for children and families. Each month's report is based on reports that are validated during the prior month and ongoing data cleansing activities. Initially, the Data Quality Report will identify two types of discrepancies:

- Report Code Discrepancies: Reporting discrepancies not related to user input that remained unresolved at the conclusion of the report validation process, and

- User Input Issues
    - User entry discrepancies
    - Other observations

REPORTS VALIDATED DURING APRIL 2014

Re-Validated Reports[1]

- SZ0510   (Number of Children in Foster Care by Placement Type)
- S-PAD12 (Comprehensive Family Assessment completed within 30 days)
- SLS312   (Children with Permanency Plan Developed within 30 days of Initial Placement)
- S-PAD16 (Foster Children are registered and attending an accredited school w/3 business days of Initial or any Placement Change).
- SLS50   (Children in Emergency Shelter >45 Days)
- SZTACR (Six Month Review of the County Conference)
- S-PAD4   (Appropriate People Invited to Foster Care Review)
- SZTPHR (Annual Review of the Permanency Hearing)
- S-PAD10 (Foster Care Information given to Resource Providers at the time of Placement)

1

FINDINGS OF INDIVIDUAL REPORT VALIDATION

SZ0510 (NUMBER OF CHILDREN IN FOSTER CARE BY PLACEMENT TYPE)

Percentage of Report-Accuracy: 99.9%

Percentage of Report-Related Discrepancies[2]: .1%

Percentage of User Entry-Related Discrepancies[3]: .5%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 188 cases with seven data points. The validators identified seven *(.5%)* occurrences of user entry related discrepancies. The validators identified cases where the worker did not enter a placement in MACWIS for custody child.

Other Observations:

Of the sample of 188 cases, the validator identified one *(.1%)* report-related discrepancy where the report pulled the incorrect worker.

S-PAD12 (*COMPREHENSIVE FAMILY ASSESSMENT COMPLETED WITHIN 30 DAYS)*[*10/1/2013 – 3/31/2014][4]

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User Entry-Related Discrepancies: 4.3%

Most Commonly Noted User Entry-Related Discrepancies:

This report sample consists of 162 cases with five data points. The validators identified 35 *(4.3%)* user entry related discrepancies. The validators found instances where the FCR's response to Q108 *(Was the CFA completed within 30 calendar days of custody?)* was 'Y' but MACWIS shows the CFA was approved after 30 days of custody.

Other Observations:

This section is not applicable for this report.

SLS312 (CHILDREN WITH PERMANENCY PLAN DEVELOPED W/30 DAYS OF INITIAL PLACEMENT)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: .0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This report sample consists of 182 cases with eight data points. Of the sample of 182 cases, validators identified 111 *(61%)* cases where the service plan was not developed timely.

S-PAD16 (FOSTER CHILDREN ARE REGISTERED AND ATTENDING AN ACCREDITED SCHOOL W/3 BUSINESS DAYS OF INITIAL OR ANY PLACEMENT CHANGE)*10/1/2013 – 3/31/2014

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: .2%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 184 cases with seven data points. The validators identified two *(.2%)* occurrences of user entry related discrepancies. The validators identified instances where the FCRs did not provide documentation in the comment section for 'n/a' or 'no' responses for Q9 *(Was the child registered for school within three business days?)* and Q16 *(Was the child registered for school within three business days of placement change?).*

Other Observations:

This section is not applicable for this report.

SLS50 (CHILDREN IN EMERGENCY SHELTER >45 DAYS)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

3

This section is not applicable for this report.

Other Observations:

This report sample consists of 21 cases with 12 data points. Of the sample, only two (9.52%) out of 21 were approved, 19 (90.47%) had no approval and 18 (85.71) did not have a request for an extension in MACWIS.

SZTACR (SIX - MONTH REVIEW OF THE COUNTY CONFERENCE)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This report sample consists of 188 cases with nine data points. Of the sample of 188 cases, validators identified 17 *(9%)* untimely completion of the county conference.

S-PAD4 (APPROPRIATE PEOPLE INVITED TO FOSTER CARE REVIEW)* 10/1/2013 – 3/31/2014

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 1.1%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 184 cases and 9 data points. The validators identified 18 *(1.08%)* occurrences of user-related discrepancies in which FCR's response should have been 'NA' for Q88 *(Did the reviewer find evidence that the parents were invited to Periodic Administrative Review?).*

Other Observations:

This section is not applicable for this report.

SZTPHR (ANNUAL REVIEW OF THE PERMANENCY HEARING)

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 0%

Most Commonly Noted User/Entry-Related Discrepancies:

This section is not applicable for this report.

Other Observations:

This report sample consists of 185 cases with nine data points. The validators identified 71 *(38%)* cases out of 185 sampled, in which the permanency hearing was not held timely.

S-PAD10 (FOSTER CARE INFORMATION GIVEN TO RESOURCE PROVIDERS AT THE TIME OF PLACEMENT)*10/1/2013 – 3/31/2014

Percentage of Report-Accuracy: 100%

Percentage of Report-Related Discrepancies: 0%

Percentage of User/Entry-Related Discrepancies: 3.06%

Most Commonly Noted User/Entry-Related Discrepancies:

This report sample consists of 163 cases with six data points. Of the sample of 163 cases, validators identified five *(3.06%)* occurrences of user/entry-related discrepancies. Three cases where the FCR's response for Q15 *(Did the child have a placement change during the PUR?)* was *'Yes'* however child was placed back in their own home during the review period. Reviewer should have answered as "NA". Two cases where the FCR's response for Q15 *(Did the child have a placement change during the PUR?)* was *'Yes'* however there was no documentation of placement movement. Response for Q15 should have been *'No'* and if Q15 is no, Q17 *(Was the Foster Care Provider given the foster care information form within 15 days of placement?)* should have the asterisk *(* means NA -child on home trial placement).*

Other Observations:

This section is not applicable for this report.

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[1] These reports were validated during April 2014 using data extracted from MACWIS to an independent server. Although most of them will have the same report numbers as existing reports generated from MACWIS, they are different from the MACWIS reports and will begin to replace the MACWIS reports as they are validated and refined. Since the newly developed reports will replace

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existing MACWIS reports, the Data Quality Reports will only provide information on the newly developed reports validated during the month covered by this report.

[2] Report-related discrepancies are not attributable to user error. This figure is based on the sample of cases reviewed during validation and computed *after* corrections have been made and the corrections compared to the final reports. The percentage is computed by determining the total number of possible discrepancies (the number of report fields validated multiplied by the number of cases validated) and dividing that number into the number of unresolved report-related discrepancies identified in the sample of cases reviewed.

[3] User/Entry-Related Discrepancies are discrepancies related to data entry and not attributable to programming or report-related discrepancies. They are derived from the sample of cases reviewed during validation using the same process noted above for report-related discrepancies, but they are computed *before* any user discrepancies are corrected.

[4] *This references the timeframe from which the PAD Review was selected.

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